

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000049601

**Entity Name:** TWM USA CORP.

**Current Principal Place of Business:**

55 NE 5TH AVENUE  
501  
BOCA RATON, FL 33432

**Current Mailing Address:**

55 NE 5TH AVENUE  
501  
BOCA RATON, FL 33432

**FEI Number:** 45-5234202

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MONIQUE TRONCONE CPA PA  
55 NE 5TH AVENUE  
501  
BOCA RATON, FL 33432 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name TWM SPECIAL COMPONENTS S R L  
Address VIA CESARE CANTU 104  
City-State-Zip: DOGANAREPUBLICADI SAN MARINO  
SM 47891

Title SEC  
Name TRONCONE, MONIQUE  
Address 201 NE 5TH AVENUE  
City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR  
Name MARCHESINI, SILVIA  
Address 1900 N BAYSHORE DRIVE  
4506  
City-State-Zip: MIAMI FL 33132

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MONIQUE TRONCONE

**SECRETARY**

**03/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date